



State of Tennessee
Department of Financial Institutions
511 Union Street 4th Floor
Nashville, Tennessee 37219

Memorandum:

To: All Mortgage Brokers, Lenders, and Servicers

Subject: **Licensee Renewal - \$500**

Your License under the Tennessee Residential Lending, Brokerage, and Servicing Act expires December 31, 2004. The enclosed renewal forms should be completed and returned to this office no later than December 1, 2004 as required by T.C.A. § 45-13-105.

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T.C.A. § 45-13-105(c)(2) On or before December 1 of *each year, each licensee shall pay a renewal fee of five hundred dollars (\$500.00)* and each registrant shall pay a renewal fee of one hundred dollars (\$100.00), to the commissioner for the following year, commencing January 1, together with such renewal application as the commissioner may require. Failure to pay the renewal fee or to submit a renewal application shall cause the license to expire at the close of business on December 31.
(d) No abatement of the license fee shall be made if the license is surrendered, canceled, revoked or suspended prior to the expiration of the period for which it ended.

Please be mindful that as of January 1, 2005 T.C.A. § 45-13-126 requires registration of all mortgage loan originators. The mortgage loan originator packet of information and forms will be mailed in late December. At that time, all forms will be accessible from our website at www.state.tn.us/financialinst/. If you have any questions after viewing information and answers to frequently asked questions, please call the Mortgage Loan Originator Helpline at 615-741-2837 or the Department at 615-741-3186.

T.C.A. § 45-13-126(a) Before an individual may provide services as a mortgage loan originator for a licensee or registrant, that individual shall be registered with the commissioner in affiliation with that licensee or registrant. A mortgage loan originator shall not be registered in affiliation with one or more licensee or registrant at the same time.

REQUIREMENTS FOR 2005 LICENSEE RENEWAL

Please complete all applicable questions on the pages provided.

All Licensees must provide the following items:

- 1) \$500.00 renewal fee made payable to "Department of Financial Institutions"
- 2) A fully executed original notarized surety bond effective through **December 31, 2005**. The bond must be made payable to the people of Tennessee and must include a power of attorney.

For Brokers - \$90,000
For Lenders - \$200,000
For Servicers - \$200,000

OR

Original Letter of Credit that is effective through **December 31, 2007**

For Brokers - \$90,000
For Lenders - \$200,000
For Servicers - \$200,000

- 3) A **compiled, reviewed, or audited** financial statement less than 12 months old in the name of the applicant, prepared in accordance with generally accepted accounting principles with a cover letter completed by an independent CPA or PA. It must show a tangible net worth of \$25,000 for the headquarters location, as well as, an additional \$25,000 for each location in Tennessee.
- 4) If the applicant is a **Corporation, LLC, or Limited Partnership**, please provide the TN Secretary of State control ID # on page 3 of application.

NOTICE: If any items are missing, your license cannot be renewed, and the application will be returned to you. We must have all the required items before we can issue a license for 2005. The application must be postmarked by December 1, otherwise, it will be treated as a new application and additional fees will apply.

If you have any questions, please call 615-741-3186.

The application should be mailed to:

Department of Financial Institutions
Compliance Division
511 Union Street
Nashville City Center 4th Floor
Nashville, TN 37219



LICENSE RENEWAL APPLICATION:

Renewal Fee: \$500.00

(check appropriate box(es)) <input type="checkbox"/> Broker <input type="checkbox"/> Lender <input type="checkbox"/> Servicer	OFFICE USE ONLY: Date: _____ License # _____ Check # _____ File # _____
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Please refer to accompanying instructions before completing this registration application.

I. BUSINESS ENTITY INFORMATION:

A. General

Name of Business		Business E-mail:
Street Address	City	State
County	Zip Code	Telephone No.
Federal Taxpayer I. D. Number		State where organized
Date of Organization	Date admitted into Tennessee (N/A if sole proprietor or general partnership)	
Name of Bank	Account number/s	
Name of Tennessee Registered Agent	Address of Agent	
Is the applicant affiliated in any way with a bank, bank holding company, industrial loan and thrift company, or any other lending institutions? _____		
If yes, identify and specify the affiliation _____		

B. Type of Entity: (check appropriate box)

Tenn. Secretary of State filing not required:

- ☐ An Individual doing business under own name
SSN _____
- ☐ An Individual doing business under assumed or
trade name
- ☐ A general partnership

Requires Tenn. Secretary of State filing:

- ☐ A corporation - please list Tenn. control ID # _____
- ☐ An Association
- ☐ A limited partnership
- ☐ A trust
- ☐ A Limited Liability Company - please list
Tenn. control ID # _____
- ☐ Other _____
(Describe)

C. Regulatory History

1. Has the Licensee ever been subject to any administrative action by a State or Federal Regulatory Agency? Yes _____ No _____
2. Has the Licensee ever surrendered or been refused a license by any State or Federal Regulatory Agency? Yes _____ No _____
3. Has there been any felony indictment of the licensee or any of its officers, directors or principals? Yes _____ No _____
4. Has there been any felony conviction of the licensee or any of its officers, directors or principals? Yes _____ No _____
5. Has the applicant filed for reorganization or bankruptcy? Yes _____ No _____

If the answer to any of the above questions is yes, please see page 9.

6. Name of State(s) where the applicant or its affiliates currently broker, originate or service first mortgage loans. _____

II. PERSONNEL

List below the names and business addresses for all officers, directors, members, shareholders or partners for this business entity. "Officers" means chief executive and/or operating officer, president, executive or senior vice president, secretary or treasurer. "Shareholders" means if total number of shareholders equals 20 or less, or only of those shareholders holding (or controlling) 10% of the outstanding voting stock of the corporation if there are more than 20 shareholders. If more space is required, please use an additional sheet. (If the licensee is an individual, please indicate "N/A" for the below.)

Name and title	Business Address (Street, City, State and Zip code)
Are all officers and directors listed?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Individual Responsible for the Tennessee Operations of the Applicant:

Name	Telephone No.
Street Address	Fax No.
City	Zip code

III. OPERATION AND RECORD RETENTION

A. Location of the principal U. S. Office of the applicant:

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Name Telephone No.
Street Address
City State Zip Code

B. Location where official books and records of the applicant are kept:

()
Name Telephone No.
Street Address
City State Zip Code

C. Please identify all additional Tennessee office locations at which the business of the applicant is conducted. Attach additional pages if necessary:

()
Name Telephone No.
Street Address
City State Zip Code

D. Location where pertinent loan documentation is kept regarding loans closed in Tennessee:

()
Name Telephone No.
Street Address
City State Zip Code

IV. AFFIDAVIT OF OFFICIAL SIGNING OF REGISTRATION

STATE OF _____

SS

COUNTY OF _____

I, _____ of the
_____ officer's name and title

organized in the State of _____
do hereby declare that I am duly authorized to file the foregoing application and that the statements and
representations set forth therein are true to the best of my knowledge and belief.

Officer's signature

Subscribe and sworn to before me, a Notary Public in and for the County of _____,
State of _____, in this _____ day of _____, 20 _____

(Notary seal)

Notary Public

My commission expires _____

V. BOND

MORTGAGE BROKER, LENDER OR SERVICER

KNOW ALL PERSONS BY THESE PRESENTS, that _____
_____ of _____, State of _____
as PRINCIPAL and _____ of _____
_____ as SURETY and held and firmly bound unto the People of the State of Tennessee,
for the use of said State and of any person or persons who may have a cause of action against the above
principal under the provisions Tennessee Residential Lending Brokerage and Servicing Act (TCA. § 45-
13-101 *et seq.*), in the sum of \$ _____, lawful money of the United States, to be paid to the
said People of the State of Tennessee or it's assigns, for payment to be well and truly made, we bind
ourselves jointly and severally, firmly by these presents.

Sealed with our seals, and dated this _____ day of _____, 20 _____.

WHEREAS, the above bounden principal has received, or is about to receive, a license from the
Commissioner, Financial Institutions of said state of Tennessee authorizing _____
to engage in the business of a mortgage broker, lender or servicer under the provisions of Tennessee
Residential Lending Brokerage and Servicing Act (TCA. § 45-13-101 *et seq.*)

The condition of this obligation is such, that if the said principal will conform to and comply with each
and every provision of Tennessee Residential Lending Brokerage and Servicing Act (TCA. § 45-13-101
et seq.), and all rules and regulations lawfully promulgated thereunder by the Commissioner, Financial
Institutions of the State of Tennessee, and will pay to said State and to such person or persons, any and all
monies that may become due or owing to said State and to such person or persons from the obligor,
principal, and by virtue of the provisions of said Tennessee Residential Lending Brokerage and Servicing
Act (TCA. § 45-13-101 *et seq.*), then this obligation shall be void, otherwise it is to remain in full force
and effect. Regardless of number of years this bond remains in effect, in no event shall the surety's
liability exceed the penal sub of the bond as stated herein.

This bond shall be effective _____, 20 _____ and shall be in force for the term ending
_____, 20 _____. This bond may be continued in force for an additional term or
terms by suitable continuation certificates executed by the surety with the approval of the Commissioner,
pursuant to such regulations, as may hereafter be provided.

IN PRESENCE OF:

PRINCIPAL

SURETY

VI. SUPPLEMENTAL QUESTIONNAIRE:

If you answered "yes" to any Regulatory History Questions (page 5) please provide the following details, attach additional sheets if needed.

- a. The type of any judicial or administrative proceeding in which you were involved.
- b. Describe any charges brought against you.
- c. The factual background.
- d. Your name as listed in the court pleadings.
- e. The name and address of any co-defendant.
- f. The name of the court having jurisdiction & the court address.
- g. The case or docket numbers.
- h. Whether any judgment or conviction was entered on each charge, the date of the judgment or conviction, the name of the judge, administrative law judge, referee or other magistrate that entered the judgment or conviction. (Please also attach a copy of any judgment or conviction entered).
- i. Detail any sentence received, including but not limited to, pretrial diversion, court supervision, probation, incarceration; the date of sentencing and the name of the sentencing judge, referee or other magistrate. (Please also attach a copy of any sentencing order).
- j. The name, address and telephone number of any attorney who represented you.

VII. CERTIFICATION

I hereby certify that the foregoing APPLICATION is true and correct to the best of my knowledge and belief. I understand that omissions or inaccuracies may result in the denial of the APPLICATION.

Signature

Date

STATE OF _____

SS

COUNTY OF _____

On this _____ day of _____, 20 _____ before me, a Notary Public in and for said County personally appeared _____ known to me to be said person named in and who executed the foregoing application and made oath that the statements and representations set forth herein are true to the best of his/her knowledge and belief.

(Notary seal)

Notary Public

My commission expires _____